, (		UNITED STATE	S DISTRICT	COURTECUIVED
			for the	in Clerk's Office
Dis			istrict of	AUG 08 2022
⊀ने वर	A de la companya de l	*	Division	U.S. District Court Middle District of TN
	7		Case No.	
(Write the full na	ame of each plaintiff	eve 1 Mouve s) who is filing this complaint.	) ) )	(to be filled in by the Clerk's Office)
	e attached" in the spo	ot fit in the space above, ace and attach an additional	) ) )	03-22 0585
Beclf	and Co	Til	) )	
Beck	Gord Cou	Ay Soil	)	
an solot a	Defendant	(s) /	)	
names of all the a write "see attach	defendants cannot fit red" in the space and	t who is being sued. If the in the space above, please attach an additional page	)	
vun ine juu iisi o	y names. Do not inc	lude addresses here.)		

#### COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

#### NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

# I. The Parties to This Complaint

	A.	The	Plain	tiff(s
--	----	-----	-------	--------

Provide the information below for oneeded.	each plaintiff named in the cor	mplaint. Attach	additional pages if
Name	Rendell Deie	1 Moure	:*
All other names by which	The Marine Marine	and a second	
you have been known:			
ID Number		•	
Current Institution	Berthorel Co.	Sail	
Address	110 North C	eek De	
	Shelbyville	State	Zip Code

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1 Name Job or Title (if known) Shield Number Employer Address	Beckerch Co. Tempessee  110 North Creek Dy. Shelly Wille Tow 3716  V Individual capacity Official capacity
Defendant No. 2  Name  Job or Title (if known)  Shield Number  Employer  Address	Beckford Co. JAN 37/60 Shelb Wille State Zip Code  Individual capacity Official capacity

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

III.	D. Priso	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia."  42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under Bivens, explain how each defendant acted under color of federal law. Attach additional pages if needed.  They were in the proof they have the Tower window, many power to stop the fight they have cameras and the Atlenst and hour and a half before they stopped it.  They were in the proof the fight they let it go on for any status. Stop the Fight,  were whether you are a prisoner or other confined person as follows whether the anshelic
	Tildica	tte whether you are a prisoner or other confined person as follows (check all that apply):
	V	Pretrial detainee
		Civilly committed detainee
		Immigration detainee
		Convicted and sentenced state prisoner
		Convicted and sentenced federal prisoner
		Other (explain)
IV.	Statem	ent of Claim
	alleged further any cas	s briefly as possible the facts of your case. Describe how each defendant was personally involved in the wrongful action, along with the dates and locations of all relevant events. You may wish to include details such as the names of other persons involved in the events giving rise to your claims. Do not cite ses or statutes. If more than one claim is asserted, number each claim and write a short and plain ent of each claim in a separate paragraph. Attach additional pages if needed.
	A.	If the events giving rise to your claim arose outside an institution, describe where and when they arose.
	B.	If the events giving rise to your claim arose in an institution, describe where and when they arose.
		Bedford Co, SAIT 110 North Creek Dr.
		D-pad / 23 And I hr. pad shelbyville TN 37160

C. What date and approximate time did the events giving rise to your claim(s) occur?

6/13/22 5:45 AM

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

Revelett Devel Moore got into fight with Samuel (County Immale) Got Busted lip got mental Benicio Anguish Devised me medical Attention resulting Immale) In sears. Correctional officer Havel Stated out his mouth he would have came in cell to stop Eight but rather watch the out come til more man power came.

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Busted lip, Denied medical Treatment was placed in holding cell in Booking Mental Anguish was placed Back in the pool with The same state Inmate \*(samuel Benicio)\* in C-pool again after The fight.

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

For Pain & Suffering Busted lip Devised medical Mental Anguish I would like To be paid 400,000,000

#### VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	Yes
	☐ No
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
	Bedford County Sail
В.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes
	□ No
	Do not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
	1 Yes
	☐ No
	Do not know
	If yes, which claim(s)?
	Didn't regions of the green need in 10/22
	Didn't recieve civil packed til 7/27/22 WAS Tobl They would send one But the reason I was in the part D-pod is because I was supposed high securely  And was classified to have a light securely
	D-pod is because I was supposed but the pay
	AND WAS Classified to have a immale
(	Case 3:22-cv-00585 Document 1 Filed 08/08/22 Page 6 of 12 Page ID #: 6
	I WASN'T MOVING.

D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?
	Yes
,	No 11
	If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?
	Yes
	No
E.	If you did file a grievance:
	1. Where did you file the grievance?
	Bedford County JAil.
	2. What did you claim in your grievance? I wanted to recieve
	The lawsuit packet,
	3. What was the result, if any? Completed they gave packet
	4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If
	not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

	F.	If you did not file a grievance:			
		1. If there are any reasons why you did not file a grievance, state them here:			
		to the second of			
		2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:			
	G.	Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.  Check the Kiosk-box And I CAN Show you All what was said stating proven fac			
		(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)			
VIII.	Previou	is Lawsuits			
The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court with the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in brought an action or appeal in a court of the United States that was dismissed on the grounds that it malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under im danger of serious physical injury." 28 U.S.C. § 1915(g).					
	To the b	pest of your knowledge, have you had a case dismissed based on this "three strikes rule"?			
	Yes	S			
	No				
	If yes, st	tate which court dismissed your case, when this occurred, and attach a copy of the order if possible.			

A.	Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?
	Yes
# *	No
В.	If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1. Parties to the previous lawsuit Plaintiff(s) Defendant(s)
	2. Court (if federal court, name the district; if state court, name the county and State)
	3. Docket or index number
	4. Name of Judge assigned to your case
	5. Approximate date of filing lawsuit
	6. Is the case still pending?  Yes
	No
	If no, give the approximate date of disposition.
	7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
C.	Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

		Complaint for Violation of Civil Rig	gitts (1 Haoilei)				
	Į,	No					
<b>D.</b>	It n	f your answer to C is yes, on the contract of	describe each law	suit by a al lawsu	nswering questits on another p	tions 1 through 7 belo page, using the same	w. (If there is format.)
	1	. Parties to the previous	lawsuit				
		Plaintiff(s)					
		Defendant(s)	* * * * * * * * * * * * * * * * * * * *				
	2.	. Court (if federal court,	name the district	: if state	court, name th	e county and State)	
		,,,,		, ,, ,,,,,,,,	Town ty manne m	o oouniy una olaloj	
		· · · · · · · · · · · · · · · · · · ·				* * · · · · · · · · · · · · · · · · · ·	
	3.	Docket or index numbe	r				
	4.	Name of Judge assigned	l to your case				
	5.	Approximate date of fili	ng lawsuit				
		<del></del>					
	6.	Is the case still pending?	•				
		Yes					
		No					
		If no, give the approximation	ate date of dispos	ition			
			-				
	7.	What was the result of the in your favor? Was the c	ne case? (For exc case appealed?)	imple: V	Vas the case di.	smissed? Was judgm	ent entered

## IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

#### A. For Parties Without an Attorney

Date of signing:

I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

07/27/22

	Signature of Plaintiff Printed Name of Plaintiff Prison Identification # Prison Address	Rendell Aer Bendell Aer 110213 110 North Cree Shelbyville	el Moo K Drive Tru State	0re ve 37160 Zip Code			
В.	For Attorneys						
	Date of signing:	· · · · · · · · · · · · · · · · · · ·					
	Signature of Attorney Printed Name of Attorney						
	Bar Number						
	Name of Law Firm						
	Address		,				
		Čity	State	Zip Code			
	Telephone Number E-mail Address						
	D man Addiess	- control of the cont					

U.S. District Court Middle District of TN RECEIVED in Clerk's Office AUG 08 2022 U.S. District Goot, Middle District of Tennessee MASHVILL 801 Broadway, room 800 Nashwille, TN 37203 Inmate